2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# H92971

Address:

City-St-Zip:

2131 N.W. 16TH ST.

CRYSTAL RIVER, FL 34428 US

FILED Jan 11, 2008 Secretary of State

Entity Name	: SHARON	I MULVI	IE E.A., INC.			•	
Current Principal Place of Business:				New Principal	New Principal Place of Business:		
2131 N.W. 16 CRYSTAL RI		428	US				
Current Mailing Address:				New Mailing A	New Mailing Address:		
2131 N.W. 16 CRYSTAL RI		428	US				
FEI Number: 59	9-2618348	FEI N	umber Applied For()	FEI Number Not Applicabl	e () Certific	ate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Add	Name and Address of New Registered Agent:		
MULVIE, DAY 2131 N.W. 16 CRYSTAL RI	6TH ST	428	US	MULVIE, SHAF 2131 N.W. 16T CRYSTAL RIVI	H ST	US	
The above na in the State o		submits	this statement for the pu	rpose of changing its re	gistered office or I	registered agent, or both,	
SIGNATURE: SHARON L. MULVIE					01/11/2008		
Electronic Signature of Registered Agent				t		Date	
Election Campa	aign Financing	g Trust F	fund Contribution ().				
OFFICERS AND DIRECTORS:				ADDITIONS/C	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Name: Name: Address: 2	PS () MULVIE, DAVID 2131 N.W. 16TH CRYSTAL RIVE	H ST.	4428 US	Title: Name: Address: City-St-Zip:	() Change	() Addition	
Name: Name: Address: 2	VP () MULVIE, SHARO 2131 N.W. 16TH CRYSTAL RIVE	H ST.	4428 US	Title: Name: Address: City-St-Zip:	() Change	() Addition	
Title: T Name: H	Γ () HASTINGS, MEI	Delete LINDA		Title: Name:	() Change	() Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: SHARON L. MULVIE VP 01/11/2008